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APPLICATION NO.	FILING DATE		FIRST NAMED INV	ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
TITLE OF INVENTION: A						
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	0	\$300	\$1700	06/09/2005
EXAM	INER	ART UN	IIT III	CLASS-SUBCLASS]	
TUGBANG, A	NTHONY D	3729	•	029-025350		
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Thompson Hine LLP P.O. Box 8801 Dayton OH 45401-8801			
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNE	an assignee is identified 37 CFR 3.11. Completion	below, no assignee n of this form is NO	data will appear of T a substitute for fi	• • •	nee is identified below, the	document has been filed for
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